## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE
APPLICANT(S)	

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	AS FILED		AFTER AFTER 1st AMENDMENT 2nd AMENDM			
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TOTAL CLAIMS	40	1.1337.08		A37.74		Mr. Arm

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-1360 (REV. 3-78)

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